MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
[illegible]
CHARLOTTE, NORTH CAROLINA 28203

STR. NO. 21256
I.C. NO. PO 215-102-09
DATE: August 24, 1984

Mr. Warren B. Morgan, Jr.
312 Church Street
Monroe, North Carolina 23110

RE: Property located at Marglyn Drive

Dear Mr. Morgan:

At your request, a field investigation was conducted on the property designated above. The soils on the property were found to contain a limited area of provisionally suitable soil for the installation of a ground absorption sewage disposal system. A copy of the site evaluation report is enclosed for your information.

Should you desire to file for permission to install a ground absorption sewage disposal system, please submit plot plans for the proposed construction, well, and ground absorption sewage disposal system to this office. They will be reviewed and if it is found that there is an adequate area of provisionally suitable soil to accommodate the proposed installation, an Improvements Permit will be issued by this office.

If I may be of assistance, please feel free to call.

Sincerely,

Bill D. Hardister, Jr.

Bill D. Hardister, Jr.
Environmental Health Supervisor

BDH/kbg

Enclosure

Date Received 8-15-84

MECK COUNTY DEPARTMENT OF
RECEIVED
AUG 1 1 1984
ENVIRONMENTAL HEALTH

SIR No. 21356
P. O.
T. C. No. 215-102-09
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

APPLICATION FOR SOIL INVESTIGATION

1) NAME OF OWNER MORGAN, JR. WARREN B.
LAST FIRST MIDDLE

2) ADDRESS OF OWNER 312 NORTH CHURCH STREET, MONROE, N. C. ZIP 28110

3) PHONE NO. Home 385-9631 (AC 704) Office (AC 704) 289-2855

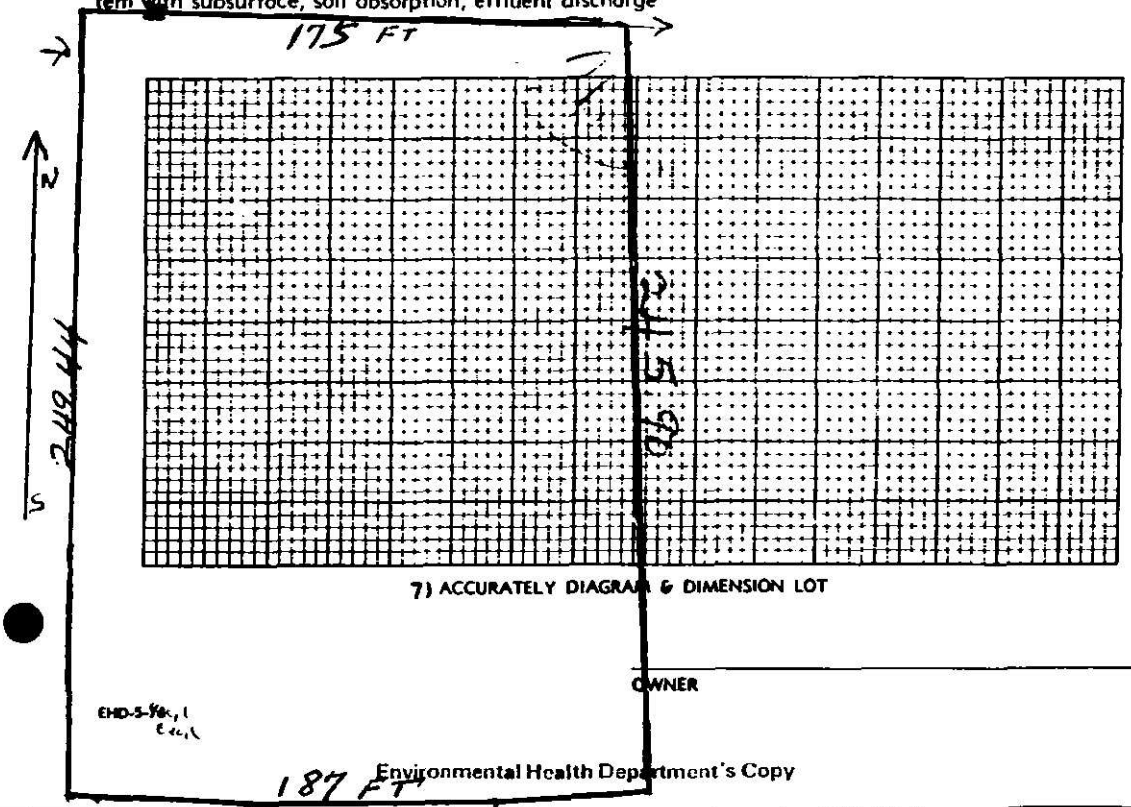
4) LOCATION OF PROPERTY MARGLYN DRIVE, STATE ROAD 3178
STREET OR COUNTY ROAD

5) SUBDIVISION _____ LOT NO. 4 BLOCK NO. _____

MAP BOOK NO _____ PAGE NO. _____

6) DEED REFERENCE: DEED BOOK _____ PAGE NO. _____

Application is hereby made to the Mecklenburg County Department of Environmental Health for the conduct of a soil investigation and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge



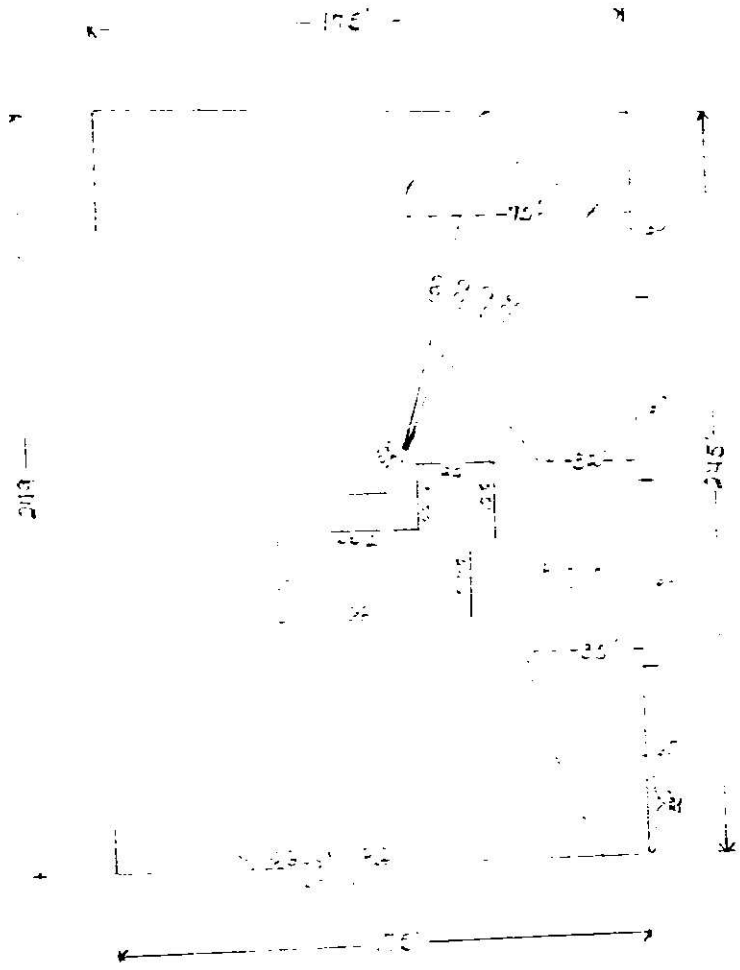
7) ACCURATELY DIAGRAM & DIMENSION LOT

_____
OWNER

EHD-5-[illegible]

Environmental Health Department's Copy

SIR 81356



Stanley A. Jacobs

Date Received 11-9-84

INSTRUCTIONS ON BACK
1984
ENVIRONMENTAL HEALTH

ICAR(S) Application No. 21356

T. C. No. AO 21510209

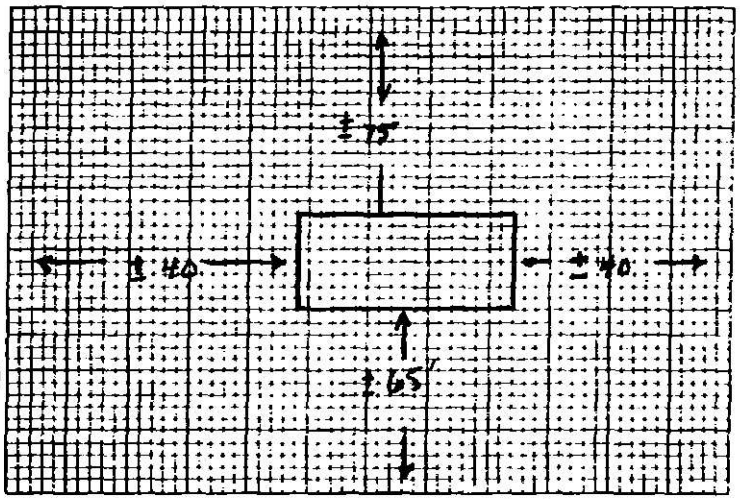
Map Date 2

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Department of Environmental Health for a permit to:

1) ✓ Install or Construct 2) ___ Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ___ Yes ___ No
Residence ✓ Yes ___ No
4) No of Bedrooms 3
5) Business Use — Max No Employees ___
6) Washing Machine ✓ Yes ___ No
7) Garbage Disposal ✓ Yes ___ No
8) Dishwasher ✓ Yes ___ No
9) Water Supply
A) Individual Well ✓
B) Governmental System ___
C) Community System
1 Well source ___
2 Governmental source ___
10) Sewage System
House located within 200 feet of public sewer ___ Yes ✓ No
House located within 200 feet of community sewer ___ Yes ✓ No
11) FHA Case No. ___
12) VA Case No. ___

13) NAME OF OWNER LUCKHARDT (LAST) WESLEY (FIRST) AARON (MIDDLE)

14) ADDRESS OF OWNER % SHIRLEY JACOBS 2908 ROCK SPRINGS RD. 28226.

15) PHONE NO. Home 542-7330 Office ___

16) LOCATION OF SYSTEM 2001 MARGLYN DR. (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. 4 Block No. ___

Map Book No. ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES ___ NO DATE RUN ___

20) PTR NUMBER (See Instructions) 21356

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

11-9-84
DATE OF APPLICATION

Wesley A. Luckhardt
OWNER
by: Shirley A. Jacobs

EHD-S-76

Environmental Health Department's Copy

Date Issued 11-9-84

Serial No. 7979

SIR No. 21356

T. C. No. PO 215-102-09

Map Date L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
IMPROVEMENT PERMIT
TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Luckhardt, (LAST) Wesley (FIRST) Aaron (MIDDLE)

ADDRESS OF OWNER % Shirley Jacobs 2908 Rock Springs Rd., Charlotte, NC ZIP 28226

LOCATION OF LOT 2001 Marglyn Drive (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. 4 BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO. _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 21356. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was r[illegible].
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altered, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit.

B. K. Ferguson
Environmentalist

Dave D. Harkey Jr.
Environmental Health Director, or Authorized Section Head

EHD-S-76

Environmental Health Department's Copy

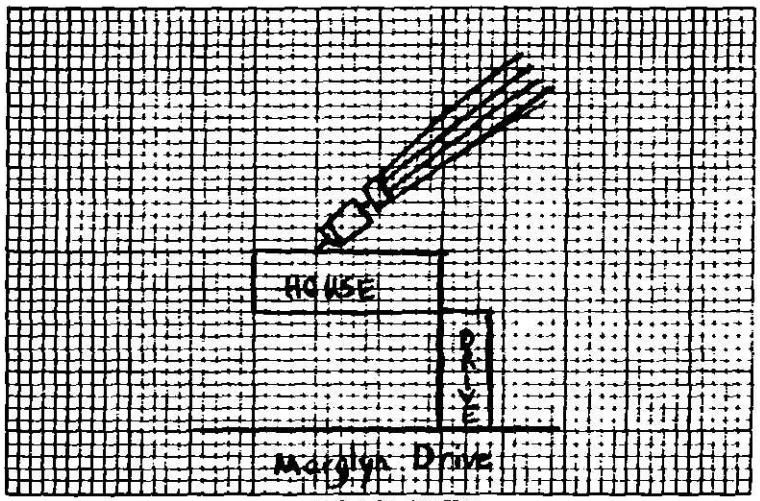
Date Issued 11/16/84

Serial No. 07858

ICAR(S) Permit No. 21356
T. C No. 215-102-09
Map Date L

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby given to ✓ Install or Construct, ___ Alter or Repair the individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in application 21356, dated 11/9/84 and this permit shall be void and of no effect if the information provided in the application is not true or is erroneous. All work shall be completed on or before 2/15/85, after which date this permit shall be null and void.



PLOT OF SYSTEM

Permeability Rate PS

Liquid Capacity of Tank 1500 gal

Tank Construction PCC

Absorption and/or Nitrification Lines

Total Line Length 400'

Number of Lines 4 X 100'

Distance from House 5'

Distance from Property Line 10'

Distance from Well Stay 100' away

NAME OF OWNER Jacobs, Shirley

LOCATION OF PROPERTY 2001 Marglyn Drive

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Health Commission which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Environmental Health Director before any system can be covered up or otherwise rendered uninspectable or can be used. The issuance of this permit does not in any way guarantee that the system anticipated to be constructed will operate properly, or relieve any person now or hereafter owning, controlling or using such system from any liability resulting from the failure of the system to operate properly.

4 Trenches x 3'x 100'x 12" stone with gradeboards and straw as cover

Comments

Division or Section Head

Cynthia G Bass
Environmentalist

* If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Department of Environmental Health in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

BHD-5-74

Environmental Health Department's Copy

C of A (s) No. 21356

Date Issued 1-25-85 **Serial** 7261 T. C. No. 215-102-09

L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
CERTIFICATE OF COMPLETION
CERTIFICATE OF APPROVAL
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Jacobs Shirley
LAST FIRST MIDDLE

Location of Property 2001 Marilyn Dr.

Application Number 21356 Permit Number 21356

Inspection Date:

Liquid Capacity of Tank 1560 Tank Material PC

Total Length of Drain Tile 400' Number of Lines 4

Depth of Filter Material 12" Cover Depth 15"+

Water Supply Source Well Distance from Water Source 50'+

Excavation Inspected 1-25-85 DATE Tank Inspected 1-25-85 DATE

Nitrification Field Inspected 1-25-85 DATE

Washing Machine Line Inspected, If Applicable N/A DATE

The undersigned has inspected the Individual Septic Tank System with subsurface, soil absorption, effluent discharge as described above and it has been L installed or constructed, altered or repaired in accordance with the permit issued and the regulations of the Mecklenburg County Health Commission in effect on the date of issuance of the permit. The issuance of this Certificate of Approval does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, controlling, or using such system from any liability resulting from the failure of the system to operate properly. This Certificate of Approval is issued subject to those restrictions and conditions shown on the permit(s) in addition to those listed below under comments. This Certificate of Approval shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Comments

Environmentalist

EHD-5-76

Environmental Health Department's Copy